

02-24-24

HDP/SB/21 based on PTO/SB/21 (08-00)

Please type a plus sign (+) inside this box → ☐**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	<b>Application Number</b>	10/600,106	
	<b>Filing Date</b>	06/20/2003	
	<b>First Named Inventor</b>	Guido Wiertz, et al.	
	<b>Group Art Unit</b>	3748	
	<b>Examiner Name</b>	Unknown	
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b>	0315-000547

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  <b>Request for Corrected Official Filing Receipt and Return Receipt Postcard</b>
<b>Remarks</b>		<b>The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.</b>

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

<b>Firm or Individual name</b>	Harness, Dickey & Pierce, P.L.C.	<b>Attorney Name</b> Michael J. Schmidt	<b>Reg. No.</b> 34,007
<b>Signature</b>			
<b>Date</b>	February 3, 2004		

**CERTIFICATE OF MAILING/TRANSMISSION**

I hereby certify that this correspondence is being deposited with the United States Postal Service as express mail in an envelope addressed to: Director of the U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date indicated below.			
<b>Typed or printed name</b>	Michael J. Schmidt	<b>Express Mail Label No.</b>	EV 406 074 413 US (02/03/2004)
<b>Signature</b>		<b>Date</b>	February 3, 2004

EV 406 074 413 US



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No. 0315-000547

Group Art Unit: 3748 )  
Inventor: Guido Wiertz, et al. )  
Serial No.: 10/600,106 )  
Filed: June 20, 2003 )  
For: Plural Compressors )

**REQUEST FOR CORRECTED  
OFFICIAL FILING RECEIPT**

Mail Stop: Initial Patent Examination's Filing Receipt Corrections  
Director for Patents  
P.O. Box 1450  
Alexandria, VA 22213-1450

Sir:

We acknowledge receipt of the Official Filing Receipt for the above-identified application, a copy of which is attached. However, two of the Applicants names are incorrect, and should be as listed in the Declaration and Power of Attorney and as follows:

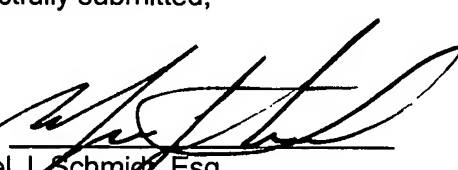
"Guido Weirtz" should be -- **Guido Wiertz** --  
"Clyde Verhof" should be -- **Clyde Verhoff**

Accordingly, please correct your records and issue a corrected filing receipt. Additionally, we have attached a corrected ADS.

Respectfully submitted,

Dated: *February 3, 2004*

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By:   
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Attorney for Applicants

Attachment



## UNITED STATES PATENT AND TRADEMARK OFFICE

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APPL NO.	FILING OR 371 (c) DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/600,106	06/20/2003	3748	1602	0315-000547	10	58	5

27572

HARNES, DICKEY & PIERCE, P.L.C.  
 P.O. BOX 828  
 BLOOMFIELD HILLS, MI 48303

CONFIRMATION NO. 7792

FILING RECEIPT



\*OC000000010699858\*

Date Mailed: 08/14/2003

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

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Domestic Priority data as claimed by applicant

## Foreign Applications

If Required, Foreign Filing License Granted: 08/14/2003

Projected Publication Date: To Be Determined - pending completion of Missing Parts

Non-Publication Request: No

Early Publication Request: No

**Title**

Plural compressors

**Preliminary Class**

418

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Title 35, United States Code, Section 184  
Title 37, Code of Federal Regulations, 5.11 & 5.15**

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